

SENATE BILL 2893

By Herron

AN ACT to amend Tennessee Code Annotated, Title 63,
Chapter 6, relative to anatomic pathology services.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 63, Chapter 6, is amended by adding Sections 2 through 8 of this act as new part 12.

SECTION 2. A clinical laboratory or physician, located in this state, or in another state, providing anatomic pathology services for patients in this state, shall present or cause to be presented a claim, bill or demand for payment for these services only to the following:

- (1) The patient directly;
- (2) The responsible insurer or other third-party payor;
- (3) The hospital, public health clinic, or nonprofit health clinic ordering such services;
- (4) The referring laboratory, other than a laboratory of a physician's office or group practice that does not perform the technical or professional component of the anatomic pathology service for which such claim, bill, or demand is presented; or
- (5) Governmental agencies or their specified public or private agent, agency, or organization on behalf of the recipient of the services.

SECTION 3. Except as provided by Section 7 of this act, no licensed practitioner in the state shall, directly or indirectly, charge, bill, or otherwise solicit payment for anatomic pathology services unless such services were rendered personally by the licensed practitioner or under the licensed practitioner's direct supervision in accordance with Section 353 of the Public Health Service Act (42 U.S.C. 263a).

SECTION 4. No patient, insurer, third party payor, hospital, public health clinic, or nonprofit health clinic shall be required to reimburse any licensed practitioner for charges or claims submitted in violation of this part.

SECTION 5. Nothing in this part shall be construed to mandate the assignment of benefits for anatomic pathology services as defined in Section 6 of this part.

SECTION 6. For purposes of this part, "anatomic pathology services" means:

(1) Histopathology or surgical pathology, being the gross and microscopic examination and histologic processing of organ tissue performed by a physician or under the supervision of a physician;

(2) Cytopathology, being the examination of cells, from fluids, aspirates, washings, brushings, or smears, including the Pap test examination performed by a physician or under the supervision of a physician;

(3) Hematology, being the microscopic evaluation of bone marrow aspirates and biopsies performed by a physician, or under the supervision of a physician, and peripheral blood smears when the attending or treating physician, or technologist requests that a blood smear be reviewed by a pathologist;

(4) Sub-cellular pathology and molecular pathology; or

(5) Blood-banking services performed by pathologists.

SECTION 7. The provisions of this part do not prohibit billing of a referring laboratory for anatomic pathology services in instances where a sample or samples must be sent to another specialist, provided, for purposes of this section, "referring laboratory" does not include a laboratory of a physician's office or group practice that does not perform the technical or professional component of the anatomic pathology service involved.

SECTION 8. The appropriate state licensing board having jurisdiction over any practitioner who may request or provide anatomic pathology services may revoke, suspend or deny renewal of the license of any practitioner who violates the provisions of this part.

SECTION 9. This act shall take effect July 1, 2006, the public welfare requiring it.